Effe	ective October 1, 2	MINATION RE	CORD					umber
	AS FILED - PART)8 <i>0</i> >	1050		, ;
TOTAL CLAIMS	(Column 1)	(Column 2)	SM. TYF	ALL ENT	IITY J	OR S	OTHI	ER THAI L ENTIT
FOR	NUMBER FILED	Allungas	-	ATE	FEE	7	RATE	
TOTAL CHARGEABLE CLAIMS		NUMBER EXTRA	BAS	IC FEE	85.00	OR BA	SIC FE	
INDEPENDENT CLAIMS	minus 3 =	*	_ X	\$ 9=		OR X	\$18=	
MULTIPLE DEPENDENT CLAIM F	PRESENT		_ X	13=	·	OR ×	(86=	1
* If the difference in column 1 is	ess than zero, enter "0" in column 2		J +14	+145=		OR +290		1
CLAIMS AS A	MENDED - PART	"0" in column 2	TO	TAL.		L	TAL	
(Column 1)	(Colum		n SM/	LL ENT		01	THER	THAN
1	HIGHE NUMBE	ST PRESENT	7		DI-	OR SM	ALL	ENTITY
AMENDMENT	PREVIOU PAID FO	JOLY EVIDA	RAT		NAL	RA	TE	ADDI- TIONAL
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FIRST PRESENTATION OF MU	ILTIPLE DEPENDENT C	=	X43:	=				
İ 1		<u></u>	+145:			"-		
9210			TOT ADDIT, F	AL .	OI OI	TO	TAI	
(Column 1)	(Column HIGHEST		700H.F	=C L _		ADDIT.	FEE L	
REMAINING AFTER AMENDMENT	NUMBER PREVIOUS	PRESENT	RATE	ADD TION				ADDI-
Total	PAID FOR	=	ļ	FEE		RATI		IONAL FEE
Independent * / M	linus *** //)		X\$ 9=	-	OR	X\$18	=	
FIRST PRESENTATION OF MULT	TIPLE DEPENDENT CLA	AIM	X43=		OR	X86=		
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(Column 1)	(Column 2)	· / .	ADDIT. FEE		OR.	TOTA ADDIT. FE	AL .	
CLAIMS REMAINING	HIGHEST NUMBER						٠.	
AFTER AMENDMENT	PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL	1 1	RATE		DDI- DNAL
Total * Min	nus **	=	X\$ 9=	FEE	1 1		 	EE
	nus ***	=			OR	X\$18=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			X43=		OR	X86=		
the "Highest Number Section 11 the entry in column 2, write "0" in column 2			+145=		OR	+290=		
he "Highest Number Previously Paid For "Highest Number Previously Paid For"	" "" "" U O CAUE ENAGE IN	100 00 anta- 800 s	TOTAL ADDIT. FEE		OR A	TOTAL DDIT. FEE		
0-875 (Rev. 10/03)	independent) is th	e nighest number fou	nd in the appr	opriate bo	in colur	nn 1.	700	